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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/770,273	02/02/2004	Michael L. Olson	13914.849.1	9600
22913 WORKMAN N	7590 06/15/2007 JYDEGGER	EXAMINER		
(F/K/A WORKMAN NYDEGGER & SEELEY) 60 EAST SOUTH TEMPLE 1000 EAGLE GATE TOWER			AMERSON, LORI BAKER	
			ART UNIT	PAPER NUMBER
SALT LAKE C	CITY, UT 84111	3764		
			MAIL DATE	DELIVERY MODE
			06/15/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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Application No.	Applicant(s)		
10/770,273	OLSON, MICHAEL L.		
Examiner	Art Unit		
Lori Amerson	3764		

Interview Summary	10/770,273	OLSON, MICHA	EL L.
· · ·	Examiner Art Unit		
	Lori Amerson	3764	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Lori Amerson</u> .	(3)		
(2) Matt Todd, applicant's representative.	(4)		
Date of Interview: 30 May 2007.		•	
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2)∏ applicant's representative	•]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>42-45</u> .			
Identification of prior art discussed: none.			
Agreement with respect to the claims f)  was reached. g	)⊠ was not reached. h)⊡ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Applicant apologized for indicated that the latest filed amendment "C"was in error. A supplemental amdt cancelling claims 42-45.</u> (A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached.	confusion of status identifiers Applicant will withdraw Amdt "o ments which the examiner ago opy of the amendments that w	for claims 42-45 C" and file a corr reed would rende	and rected er the claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW ON reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, V	been filed, APP OAYS FROM TWHICHEVER IS	LICANT IS THIS LATER, TO
	4	in Clus	Nie
		I AMERSON RY EXAMINER	·
Evaminar Nata: Valumust sign this form unless it is an			
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's sign	ature, if required	